FORM D

UNITED STATES
SEC Mail Processing
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

FEB 2 6 2008

NOTICE OF SALE OF SECURITIES OF DC PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Numbe	er:	3235-0076			
Expires:	Арі	ril 30, 2008			
Estimated av hours per r	· ·				
SEC	USE ONI	LY			
Prefix		Serial			
DAT	E RECEIV	/ED			

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Tippit, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 514 Bryant Street, San Francisco, CA 94107	Telephone Number (Including Area Code) (415) 318-7200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Internet marketing	
Type of Business Organization	, PHUCESSED
Corporation	r (please specify): MAR 0 4 2008
Actual or Estimated Date of Incorporation or Organization: Month Year Vector Vector	Actual Estimated FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for S CN for Canada; FN for other foreign jurisdiction)	tate:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Scott Albro	
Business or Residence Address (Number and Street, City, State, Zip Code)	
514 Bryant Street, San Francisco, CA 94107	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Timothy McAdam	
Business or Residence Address (Number and Street, City, State, Zip Code)	
3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, CA 94025	
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Jeremy Liew	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2200 Sand Hill Road, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Trinity Ventures	
Business or Residence Address (Number and Street, City, State, Zip Code)	
3000 Sand Hill Road, Building 4, Suite 160, Mento Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Lightspeend Venture Partners VII, L.P.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2200 Sand Hill Road, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Glenn Solomon	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Granite Global Ventures, 2494 Sand Hill Road, Suite 100, Menlo Park, CA 94025	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Granite Global Ventures	
Business or Residence Address (Number and Street, City, State, Zip Code)	
2494 Sand Hill Road, Suite 100, Menlo Park, CA 94025	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

				В.	INFOR	MATION A	ABOUT OF	FERING				
1. Has th	ne issuer sold,	or does the i	ssuer intend t				_	ınder ULOE.			Yes	No ⊠
2. What	is the minimu	m investmen	t that will be	accepted fro	om any indivi	dual?		***************************************	••••••		\$	N/A
3. Does	the offering po	ermit joint ov	vnership of a	single unit?	***************************************			,,			Yes	Ne ⊠
4. Enter remuse perso than f	the information neration for solon or agent of a ive (5) persons r only.	n requested f licitation of p broker or dea	or each perso ourchasers in c aler registered	n who has be connection w I with the SE	een or will be vith sales of s EC and/or wit	paid or giver ecurities in th h a state or st	n, directly or interior in a directly or int	indirectly, and f a person to l name of the b	y commissio pe listed is ar roker or deal	n or similar associated er. If more		
	(Last name fir	st, if individ	ual)									
Business or	r Residence Ac	dress (Num	ber and Stree	t, City, State	, Zip Code)	 			<u> </u>			
Name of A	ssociated Brok	ter or Dealer								<u> </u>		
States in W	hich Person L	isted Has So	licited or Inte	nds to Solic	it Purchasers							
(Check *	'All States" or	check indivi	duals States)				•••••		***************************************		☐ A	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[HN]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name fir	st, if individ	ual)						<u>_</u>			
Business or	Residence Ac	idress (Num	ber and Street	t, City, State	, Zip Code)			,				
	Residence Ac	<u> </u>	ber and Street	t, City, State	, Zip Code)	,						
Name of A		er or Dealer				,						
Name of A	ssociated Brok	ter or Dealer	licited or Inte	nds to Solic	it Purchasers						□ A	II States
Name of A	ssociated Brok hich Person L	ter or Dealer	licited or Inte	nds to Solic	it Purchasers		[DE]	[DC]	[FL]	[GA]	[HI]	II States
Name of A	ssociated Brok hich Person L 'All States" or	isted Has So	licited or Inte	nds to Solic	it Purchasers							
Name of As States in W (Check '	ssociated Brok hich Person L 'All States" or [AK]	isted Has So check indivi	licited or Inte duals States) [AR]	nds to Solic	it Purchasers	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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Name of A	ssociated Brok hich Person L 'All States" or [AK] [IN] [NE]	isted Has So check indivi [AZ] [IA] [NV]	licited or Inte duals States) [AR] [KS] [NH] {TN]	(CA) [KY] [NJ]	(CO)	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of Assistance of Assistance (Check ' [AL] [IL] [MT] [RI]	ssociated Brok Thich Person L 'All States" or [AK] [IN] [NE] [SC]	isted Has So check indivi [AZ] [IA] [NV] [SD]	licited or Inte duals States) [AR] [KS] [NH] [TN]	(CA) (KY) (NJ) (TX)	it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of A	ssociated Brok Thich Person L All States" or [AK] [IN] [NE] [SC] (Last name fire	isted Has So check indivi [AZ] [IA] [NV] [SD]	licited or Inte duals States) [AR] [KS] [NH] [TN]	(CA) (KY) (NJ) (TX)	it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of Assistance of Assistan	ssociated Brok Thich Person L 'All States" or [AK] [IN] [NE] [SC] (Last name fire	isted Has So check indivi [AZ] [IA] [NV] [SD] st, if individu	licited or Inte duals States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of Assistance of Assistan	ssociated Brok Thich Person L All States" or [AK] [IN] [NE] [SC] (Last name fire Residence Accessociated Brok	isted Has So check individual [AZ] [IA] [NV] [SD] st, if individual individua	licited or Inte	[CA] [KY] [NJ] [TX]	it Purchasers [CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA]
Name of Assistates in W (Check ' [AL] [IL] [MT] [RI] Full Name Business on Name of Assistates in W	ssociated Brok Thich Person L 'All States" or [AK] [IN] [NE] [SC] (Last name fine Residence Accessociated Brok Thich Person L	isted Has So check individual [AZ] [IA] [NV] [SD] st, if individual individua	licited or Inte	[CA] [KY] [NJ] [TX]	it Purchasers [CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] {ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Name of Assistance of Assistan	ssociated Brok Thich Person L All States" or [AK] [IN] [NE] [SC] (Last name fire Residence Accessociated Brok Thich Person L 'All States" or	isted Has So check individual [NV] [SD] st, if individual cer or Dealer isted Has So check individual certain	licited or Inte	[CA] [KY] [NJ] [TX]	it Purchasers [CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Name of Asserting Williams [AL] [IL] [MT] [RI] Full Name Business on Name of Asserting Williams (Check **	ssociated Brok Thich Person L All States" or [AK] [IN] [NE] [SC] (Last name fine residence Accessociated Brok Thich Person L All States" or [AK]	isted Has So check indivi [AZ] [IA] [NV] [SD] st, if individuater or Dealer isted Has So check indivi [AZ]	licited or Inte	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PRO	CEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Agg	regate	A moun	t Already
	Type of Security	- 00	ng Price		it An eady Sold
	Debt		_	\$	0
	Equity	\$_12,17	72,001.94	\$ <u>12,1</u>	72,001.94
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (Specify)	\$	0	\$	0
	Total	\$12,1	72,001.94	\$ <u>12,1</u>	72,001.94
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			mber estors	Dollar	regate Amount irchase
	Accredited investors		9	\$ <u>12,17</u>	72,001.94
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering	•	pe of urity		Amount Sold
	Rule 505		•	\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			s	
	Printing and Engraving Costs			\$	
	Legal Fees		\boxtimes	\$	75,000.00
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify) Filing fees		⊠	<u> </u>	300.00
	Total			\$ 7	75,300.00
				- <u></u>	

Officers, D Affil Salaries and fees \$ Purchase of real estate \$ Purchase, rental or leasing and installation of machinery and equipment \$ Construction or leasing of plant buildings and facilities \$ Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \$ Repayment of indebtedness \$ Working capital \$ Other (specify): \$ Column Totals \$ Total Payments Listed (column totals added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, andertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the informatic ceredited investor pursuant to paragraph (b)(2) of Rule 502. SSUER (Print or Type) Signature Date	C. OFFER	ING PRICE, NUMBER OF INVESTORS, EXPENSES AN	D USE OF PROCEEDS	
the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payme Officers, D Affill Salaries and fees	total expenses furnished in response to	Part C - Question 4.a. This difference is the "adjusted gross		\$ <u>12,096,701.94</u>
Officers, D Affil Salaries and fees \$ Purchase of real estate \$ Purchase, rental or leasing and installation of machinery and equipment \$ Construction or leasing of plant buildings and facilities \$ Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \$ Repayment of indebtedness \$ Working capital \$ Other (specify): \$ Column Totals \$ Total Payments Listed (column totals added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, andertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the informatic ceredited investor pursuant to paragraph (b)(2) of Rule 502. SSUER (Print or Type) Signature Date	the purposes shown. If the amount for a left of the estimate. The total of the pa	to the		
Purchase of real estate			Payments to Officers, Directors & Affiliates	Payments To Others
Purchase, rental or leasing and installation of machinery and equipment	Salaries and fees		🗆 \$	□ \$
Construction or leasing of plant buildings and facilities	Purchase of real estate		🗆 \$	S
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	Purchase, rental or leasing and installa	tion of machinery and equipment	🗆 s	□ s
used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital S Other (specify): Total Payments Listed (column totals added). D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, ndertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the informatic ceredited investor pursuant to paragraph (b)(2) of Rule 502. Ssuer (Print or Type) Signatur Date	Construction or leasing of plant building	ngs and facilities	🗆 \$	\$
Working capital	Acquisition of other businesses (includused in exchange for the assets or secu	ling the value of securities involved in this offering that may be rities of another issuer pursuant to a merger)		□ s
Other (specify):	Repayment of indebtedness		🗆 \$	□ s
Other (specify):	Working capital		🔲 \$	\$12,096,701.94
Total Payments Listed (column totals added)			🗆 \$	□ s
D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, indertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the informatic ccredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Date	Column Totals			 \$12,096,701.94
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, indertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information corredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Date	Total Payments Listed (column to	otals added)	🛭 \$ <u>12,0</u> 6	96,701.94
ndertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the informatic ccredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Date		D. FEDERAL SIGNATURE	·	
	ndertaking by the issuer to furnish the U.S. Se	ecurities and Exchange Commission, upon written request of its sta		
Sunda 1	* ** *	Signatur	Date February 25, 2008	
Same of Signer (Print or Type) Title of Signer (Print or Type) February 25, 20		Title of Signer (Print or Type)	rebruary 23 , 2008	
Caine Moss Secretary	Caine Moss	Secretary		
			ND	
		ATTENTION		

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)